

Atty Docket No. 015358-006710US

PTO FAX NO.: 703-746-7240

ATTENTION: Customer Service, Initial Patent Examination

Group Art Unit: 2171

TELEPHONE NO.: 703-306-5631

**OFFICIAL COMMUNICATION  
REPLY TO NOTICE TO FILE MISSING PARTS****FOR ENTRY IN U.S. APPLICATION NO. 10/054,749  
FILED JANUARY 18, 2002****CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that the following document(s) in re Application of DAVID G. STORK et al., U.S. Application No. 10/054,749, filed January 18, 2002 for METHOD AND APPARATUS FOR PERMISSIONS BASED ACTIVE DOCUMENT WORKFLOW are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Document(s) Attached

1. SB/21 Transmittal (1 page)
2. SB/17 Fee Transmittal (in duplicate) (2 pages)
3. Declaration and Power of Attorney (2 pages)
4. Supplemental Application Data Sheet (4 pages)
5. Copy of Notice of Missing Parts (1 page)

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Dated: April 5, 2002

  
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| <b>TRANSMITTAL<br/>FORM</b><br><br><i>(to be used for all correspondence after initial filing)</i> | Application Number   | 10/054,749             |                 |
|  | Filing Date          | January 18, 2002       |                 |
|  | First Named Inventor | Stark, David G.        |                 |
|  | Group Art Unit       | 2171                   |                 |
|  | Examiner Name        | To Be Assigned         |                 |
| Total Number of Pages in This Submission   | 1                    | Attorney Docket Number | 015358-006710US |

| ENCLOSURES (check all that apply)   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment / Response<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><br><input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Declaration and Power of Attorney, Supplemental Application Data Sheet, Copy of Notice to File Missing Parts, Certification of Facsimile Coversheet |
| Remarks   |  | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.   |
| Pursuant to the Notice to File Missing Parts of Non-Provisional Application dated February 7, 2002, the enclosures listed above are to be made of record in the above-identified case. The fees required are listed on the attached Fee Transmittal to be deducted from our Deposit Account listed above.   |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |  |
|--|--|
| Firm and Individual name                   | Townsend and Townsend and Crew LLP<br>Sujit B. Kotwal<br>Reg. No. 43,336 |
| Signature                                  | <i>S. B. Kotwal</i>  |
| Date                                       | April 5, 2002  |

| CERTIFICATE OF MAILING   |                           |               |
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| I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. (703) 746-7240 on April 5, 2002 |                           |               |
| Typed or printed name  | Krista K. Merrimac        |               |
| Signature  | <i>Krista K. Merrimac</i> | Date          |
|  |                           | April 5, 2002 |

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**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT (\$)** 1950**Complete if Known**

|                      |                  |
|----------------------|------------------|
| Application Number   | 10/054,749       |
| Filing Date          | January 18, 2002 |
| First Named Inventor | Stork, David G.  |
| Examiner Name        | To Be Assigned   |
| Group Art Unit       | 2171             |
| Attorney Docket No.  | 015359-006710US  |

| METHOD OF PAYMENT   |                 | FEE CALCULATION (continued)  |                 |  |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
|---|-----------------|--|-----------------|--|-----------------|-----------------|-----------------|-----------------|----------|-----|-----|--------------|-------|-------------------------------------|-----|-----|-----|----------------|-------|--|--|-----|-----|-----|-----|--|--|----------------|-----------------|----------------|-----------------|--|----------|-----|------|-----|------|--|--|-----|--------|-----|--------|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|--|--|-----|-------|-----|-----|---|--|-----|-------|-----|-----|--|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|--------------------------|--|-----|-------|-----|-------|---|--|-----|-----|-----|----|----------------------------------|--|-----|-------|-----|-----|------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|---|--|-----|-----|-----|-----|--|--|-----|----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|
| <b>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</b><br><br>Deposit Account Number: <b>20-1430</b><br><br>Deposit Account Name: <b>Townsend and Townsend and Crew LLP</b><br><br><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |                 | <b>3. ADDITIONAL FEES</b><br><br><table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>105</td> <td>130</td> <td>205</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td>130</td> </tr> <tr> <td>127</td> <td>60</td> <td>227</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td>2,520</td> <td>For filing a request for reexamination</td> <td></td> </tr> <tr> <td>112</td> <td>920*</td> <td>112</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>113</td> <td>1,840*</td> <td>113</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>115</td> <td>110</td> <td>215</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>116</td> <td>400</td> <td>216</td> <td>200</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>117</td> <td>820</td> <td>217</td> <td>480</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>118</td> <td>1,440</td> <td>218</td> <td>720</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>128</td> <td>1,960</td> <td>228</td> <td>980</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>119</td> <td>320</td> <td>219</td> <td>160</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>120</td> <td>320</td> <td>220</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>121</td> <td>280</td> <td>221</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>138</td> <td>1,510</td> <td>138</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>140</td> <td>110</td> <td>240</td> <td>55</td> <td>Petition to revive - unavoidable</td> <td></td> </tr> <tr> <td>141</td> <td>1,280</td> <td>241</td> <td>640</td> <td>Petition to revive - unintentional</td> <td></td> </tr> <tr> <td>142</td> <td>1,280</td> <td>242</td> <td>640</td> <td>Utility issue fee (or release)</td> <td></td> </tr> <tr> <td>143</td> <td>460</td> <td>243</td> <td>230</td> <td>Design issue fee</td> <td></td> </tr> <tr> <td>144</td> <td>620</td> <td>244</td> <td>310</td> <td>Plant issue fee</td> <td></td> </tr> <tr> <td>122</td> <td>130</td> <td>122</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>123</td> <td>50</td> <td>123</td> <td>50</td> <td>Petitions related to provisional applications</td> <td></td> </tr> <tr> <td>126</td> <td>180</td> <td>126</td> <td>180</td> <td>Submission of Information Disclosure Sheet</td> <td></td> </tr> <tr> <td>581</td> <td>40</td> <td>581</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> <td></td> </tr> <tr> <td>146</td> <td>740</td> <td>246</td> <td>370</td> <td>Filing a submission after final rejection (37 CFR § 1.129(a))</td> <td></td> </tr> <tr> <td>148</td> <td>740</td> <td>248</td> <td>370</td> <td>For each additional invention to be examined (37 CFR § 1.128(b))</td> <td></td> </tr> <tr> <td>179</td> <td>740</td> <td>279</td> <td>370</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>189</td> <td>900</td> <td>189</td> <td>900</td> <td>Request for expedited examination of a design application</td> <td></td> </tr> </tbody> </table> |                 | Large Fee Code   | Entity Fee (\$) | Small Fee Code  | Entity Fee (\$) | Fee Description | Fee Paid | 105 | 130 | 205          | 65    | Surcharge - late filing fee or oath | 130 | 127 | 60  | 227            | 25    | Surcharge - late provisional filing fee or cover sheet |  | 139 | 130 | 139 | 130 | Non-English specification  |  | 147            | 2,520           | 147            | 2,520           | For filing a request for reexamination |          | 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action |  | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action |  | 115 | 110 | 215 | 55  | Extension for reply within first month |  | 116 | 400 | 216 | 200 | Extension for reply within second month            |  | 117 | 820 | 217 | 480 | Extension for reply within third month                     |  | 118 | 1,440 | 218 | 720 | Extension for reply within fourth month |  | 128 | 1,960 | 228 | 980 | Extension for reply within fifth month |  | 119 | 320 | 219 | 160 | Notice of Appeal |  | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal |  | 121 | 280 | 221 | 140 | Request for oral hearing |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or release) |  | 143 | 460 | 243 | 230 | Design issue fee |  | 144 | 620 | 244 | 310 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Petitions related to provisional applications |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Sheet |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 148 | 740 | 248 | 370 | For each additional invention to be examined (37 CFR § 1.128(b)) |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  | 189 | 900 | 189 | 900 | Request for expedited examination of a design application |  |
| Large Fee Code  | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 105   | 130             | 205  | 65              | Surcharge - late filing fee or oath  | 130             |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 127   | 60              | 227  | 25              | Surcharge - late provisional filing fee or cover sheet                     |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 139   | 130             | 139  | 130             | Non-English specification  |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 147   | 2,520           | 147  | 2,520           | For filing a request for reexamination                                     |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 112   | 920*            | 112  | 920*            | Requesting publication of SIR prior to Examiner action                     |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 113   | 1,840*          | 113  | 1,840*          | Requesting publication of SIR after Examiner action                        |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 115   | 110             | 215  | 55              | Extension for reply within first month                                     |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 116   | 400             | 216  | 200             | Extension for reply within second month                                    |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 117   | 820             | 217  | 480             | Extension for reply within third month                                     |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 118   | 1,440           | 218  | 720             | Extension for reply within fourth month                                    |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 128   | 1,960           | 228  | 980             | Extension for reply within fifth month                                     |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 119   | 320             | 219  | 160             | Notice of Appeal   |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 120   | 320             | 220  | 160             | Filing a brief in support of an appeal                                     |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 121   | 280             | 221  | 140             | Request for oral hearing   |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 138   | 1,510           | 138  | 1,510           | Petition to institute a public use proceeding                              |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 140   | 110             | 240  | 55              | Petition to revive - unavoidable   |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 141   | 1,280           | 241  | 640             | Petition to revive - unintentional   |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 142   | 1,280           | 242  | 640             | Utility issue fee (or release)   |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 143   | 460             | 243  | 230             | Design issue fee   |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 144   | 620             | 244  | 310             | Plant issue fee  |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 122   | 130             | 122  | 130             | Petitions to the Commissioner  |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 123   | 50              | 123  | 50              | Petitions related to provisional applications                              |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 126   | 180             | 126  | 180             | Submission of Information Disclosure Sheet                                 |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 581   | 40              | 581  | 40              | Recording each patent assignment per property (times number of properties) |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 146   | 740             | 246  | 370             | Filing a submission after final rejection (37 CFR § 1.129(a))              |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 148   | 740             | 248  | 370             | For each additional invention to be examined (37 CFR § 1.128(b))           |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 179   | 740             | 279  | 370             | Request for Continued Examination (RCE)                                    |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 189   | 900             | 189  | 900             | Request for expedited examination of a design application                  |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>2. <input type="checkbox"/> Payment Enclosed:</b><br><input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other   |                 | <b>1. BASIC FILING FEE</b><br><br><table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>740</td> <td>201</td> <td>370</td> <td>Utility filing fee</td> <td>740</td> </tr> <tr> <td>106</td> <td>330</td> <td>206</td> <td>165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>107</td> <td>510</td> <td>207</td> <td>255</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>108</td> <td>740</td> <td>208</td> <td>370</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>114</td> <td>160</td> <td>214</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> </tbody> </table> <p><b>SUBTOTAL (1)</b> (\$740)</p>   |                 | Large Fee Code   | Entity Fee (\$) | Small Fee Code  | Entity Fee (\$) | Fee Description | Fee Paid | 101 | 740 | 201          | 370   | Utility filing fee                  | 740 | 106 | 330 | 206            | 165   | Design filing fee                                      |  | 107 | 510 | 207 | 255 | Plant filing fee   |  | 108            | 740             | 208            | 370             | Reissue filing fee                     |          | 114 | 160  | 214 | 80   | Provisional filing fee                                 |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Large Fee Code  | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 101   | 740             | 201  | 370             | Utility filing fee   | 740             |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 106   | 330             | 206  | 165             | Design filing fee  |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 107   | 510             | 207  | 255             | Plant filing fee   |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 108   | 740             | 208  | 370             | Reissue filing fee   |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 114   | 160             | 214  | 80              | Provisional filing fee   |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>2. EXTRA CLAIM FEES</b><br><br><table border="1"> <thead> <tr> <th>Total Claims</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>66</td> <td>20**</td> <td></td> <td>48</td> <td>Extra Claims</td> <td>\$828</td> </tr> <tr> <td>6</td> <td>3**</td> <td></td> <td>3</td> <td>Fee from below</td> <td>\$252</td> </tr> <tr> <td colspan="6">Multiple Dependent</td> </tr> </tbody> </table> |                 | Total Claims   | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description | Fee Paid        | 66              | 20**     |     | 48  | Extra Claims | \$828 | 6                                   | 3** |     | 3   | Fee from below | \$252 | Multiple Dependent                                     |  |     |     |     |     | <b>2. EXTRA CLAIM FEES</b><br><br><table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>203</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>102</td> <td>84</td> <td>202</td> <td>42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>104</td> <td>280</td> <td>204</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>109</td> <td>84</td> <td>209</td> <td>42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>110</td> <td>18</td> <td>210</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> </tbody> </table> <p><b>SUBTOTAL (2)</b> (\$1080)</p> |  | Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description                        | Fee Paid | 103 | 18   | 203 | 9    | Claims in excess of 20                                 |  | 102 | 84     | 202 | 42     | Independent claims in excess of 3                   |  | 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid  |  | 109 | 84  | 209 | 42  | ** Reissue independent claims over original patent |  | 110 | 18  | 210 | 9   | ** Reissue claims in excess of 20 and over original patent |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Total Claims  | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 66  | 20**            |  | 48              | Extra Claims   | \$828           |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 6   | 3**             |  | 3               | Fee from below   | \$252           |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Multiple Dependent  |                 |  |                 |  |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Large Fee Code  | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 103   | 18              | 203  | 9               | Claims in excess of 20   |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 102   | 84              | 202  | 42              | Independent claims in excess of 3  |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 104   | 280             | 204  | 140             | Multiple dependent claim, if not paid                                      |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 109   | 84              | 209  | 42              | ** Reissue independent claims over original patent                         |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 110   | 18              | 210  | 9               | ** Reissue claims in excess of 20 and over original patent                 |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>SUBTOTAL (3)</b> (\$1950)  |                 | <b>SUBTOTAL (3)</b> (\$130)  |                 |  |                 |                 |                 |                 |          |     |     |              |       |                                     |     |     |     |                |       |  |  |     |     |     |     |  |  |                |                 |                |                 |  |          |     |      |     |      |  |  |     |        |     |        |   |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |  |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |

\*\*or number previously paid, if greater; For Reissues, see above

| SUBMITTED BY      |                 | Complete if applicable            |               |           |              |
|-------------------|-----------------|-----------------------------------|---------------|-----------|--------------|
| Name (Print/Type) | Sigit B. Kotwal | Registration No. (Attorney/Agent) | 43,336        | Telephone | 650-326-2400 |
| Signature         | S. B. Kotwal    | Date                              | April 5, 2002 |           |              |

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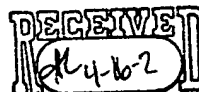
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|---|---------------------------------|------------------------|
| CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)   |                                 | Docket No.             |
| Applicant(s): John J. Kendrick, Jr., et al.   |                                 | CDUS.0007              |
| Serial No.<br>10/011,647  | Filing Date<br>December 4, 2001 | Examiner               |
|   |                                 | Group Art Unit<br>2151 |
| Invention:<br><b>A Process for Storing Electronic Documents on an Internet-Accessible Document Storage System</b>   |                                 |                        |
|   |                                 |                        |
| I hereby certify that this _____<br>Power of Attorney<br>(Identify type of correspondence)<br>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703-746-7239) |                                 |                        |
| on April 15, 2002<br>(Date)   |                                 |                        |
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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**  
**POWER OF ATTORNEY**

**Official**Docket No.  
CDUS.0007

Name of Applicant: **ControlDocs Operating Corp.**  
Address of Applicant: **16650 Westgrove Drive, Suite 400**  
**Addison, TX 75001**



Title: **A Process for Storing Electronic Documents on an Internet-Accessible Document Storage System**  
Serial No., if Any: **10/011647**  
Filed: **December 4, 2001**

**TO THE ASSISTANT COMMISSIONER FOR PATENTS**

The Assistant Commissioner for Patents  
Washington, D.C. 20231

Honorable Sir:  
I hereby appoint:

**Timothy F. Loomis, Reg. No. 37,383**

as principal attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Please direct all future correspondence to:

**Timothy F. Loomis**  
**Law Offices of Timothy F. Loomis**  
**2932 Hagen Drive**  
**Plano, TX 75025**  
**(972) 747-0706; (972) 747-9996 Fax**

By:

**Robert N. Higbee**  
**CEO**

Dated:

**4-04-02**



## UNITED STATES PATENT AND TRADEMARK OFFICE

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| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|------------------------|
| 10/054,749         | 01/18/2002          | David G. Stork        | 015358-006710US        |

20350

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EIGHTH FLOOR  
SAN FRANCISCO, CA 94111-3834

CONFIRMATION NO. 4058

## FORMALITIES LETTER



\*OC00000007434954\*

Date Mailed: 02/07/2002

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

## Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.  
*Applicant must submit \$ 740 to complete the basic filing fee for a non-small entity. If appropriate, applicant may make a written assertion of entitlement to small entity status and pay the small entity filing fee (37 CFR 1.27).*
- Total additional claim fee(s) for this application is \$1080.
  - \$828 for 46 total claims over 20.
  - \$252 for 3 independent claims over 3.
- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 1950.

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05/08/2002 VTRUONG1 00000018 201430

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